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PTO/SB/01 (10-00)

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted With Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required) OR <input type="checkbox"/> Declaration Submitted With Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	PU030279
	First Named Inventor	Guillaume Bichot et al.
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

BROADCAST OVER UNICAST IN A NETWORK

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) October 6, 2004 as United States Application Number or PCT International

Application Number PCT/US04/32963 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
US 60/509,325	October 7, 2003	

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input type="checkbox"/> Customer Number or Bar Code Label	24498	OR	<input checked="" type="checkbox"/> Correspondence address below
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Address	THOMSON LICENSING INC.				
Address	PO Box 5312				
City	PRINCETON	State	NJ	ZIP	08543-5312
Country	USA	Telephone	609-734-6440	Fax	(609) 734 - 6888
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	GUILLAUME		Family Name BICHOT or Surname		
Inventor's Signature				Date	26 November 2004
Residence: City	la Chapell Chaussee	State		Country	FR
Citizenship	FR				
Mailing Address					
Mailing Address 26 rue de Montmuran					
City	la Chapell Chaussee	State		ZIP	35630
Country	FR				
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	JUNBIAO		Family Name ZHANG or Surname		
Inventor's Signature				Date	
Residence: City	Bridgewater	State	New Jersey	Country	US
Citizenship	CN				
Mailing Address					
Mailing Address 20 Jenna Drive					
City	Bridgewater	State	New Jersey	ZIP	08807
Country	US				
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

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Attorney Docket Number

PU030279

First Named Inventor

Guillaume Bichot et al.

COMPLETE IF KNOWN**Application Number**

/

Filing Date**Group Art Unit****Examiner Name****As a below named inventor, I hereby declare that:**

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BROADCAST OVER UNICAST IN A NETWORK

the specification of which

(Title of the Invention)

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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Address	PO Box 5312				
City	PRINCETON	State	NJ	ZIP	08543-5312
Country	USA	Telephone	609-734-6440	Fax	(609) 734 - 6888
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Inventor's Signature					Date
Residence: City	la Chapell Chaussee	State	FR	Country	Citizenship
Mailing Address					
Mailing Address 26 rue de Montmuran					
City	la Chapell Chaussee	State	35630	Country	FR
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	JUNBIAO		Family Name ZHANG or Surname		
Inventor's Signature	<i>Jb 28</i>		Date 8/13/04		
Residence: City	Bridgewater	State	New Jersey	Country	Citizenship
Mailing Address					
Mailing Address 20 Jenna Drive					
City	Bridgewater	State	New Jersey	ZIP	Country
				08807	US
<input type="checkbox"/> Additional Inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

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PTO/SB/81 (11-04)

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	
	Filing Date	
	First Named Inventor	GUILLAUME BICHOT et al.
	Title	MULTICAST OVER UNICAST IN A NETWORK
	Art Unit	
	Examiner Name	
	Attorney Docket Number	PU030279

I hereby appoint:

☒ Practitioners at Customer Number **Customer Number 24498**
OR
☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.
OR
☐ The address associated with Customer Number:
OR

<input checked="" type="checkbox"/> Firm or Individual Name	Joseph S. Tripoli, Patent Operations				
Address					
Address	P. O. BOX 5312				
City	PRINCETON	State	NJ	ZIP	08543-5312
Country	USA				
Telephone	609-734-6440	Fax	609-734-6888		

I am the:

☐ Applicant/Inventor.
☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record			
Name	Catherine A. Ferguson, Registration No. 40,877		
Signature	<i>Catherine A Ferguson</i>		
Date	March 22, 2006	Telephone	609-734-6440

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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46, Quai A. Le Gallo
F-92100 Boulogne-Billancourt
France

do hereby grant

Joseph J. Laks
Vice President
Thomson Licensing Inc.
Two Independence Way
Princeton, New Jersey 08540


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DATED this ____14th____ day of __February__, in the year 2006.

Signature:

Typed Name As Signed:

Title:


Béatrix de Russé
Authorized Representative,
Vice-President Intellectual Property & Licensing

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THOMSON LICENSING

THOMSON LICENSING
46, Quai A. Le Gallo
F-92100 Boulogne-Billancourt
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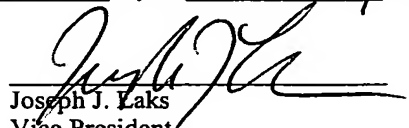
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DATED this 27th day of February, 2006.

SIGNED


Joseph J. Laks
Vice President
Thomson Licensing Inc. and
Attorney In Fact for
THOMSON LICENSING

WITNESS

